

OFFICIAL FILE

ILLINOIS COMMERCE COMMISSION

ORIGINAL

(File this application via e-docket, or if unable to do so, file one original verified application with the Chief Clerk.)

Docket No. 07-0490
ICC Office Use Only

Everycall Communications, Inc. :
d/b/a All American Home Phone :
d/b/a Local USA :
Application for a certificate of authority :
to operate as a reseller of long distance :
telecommunications services and :
facilities-based provider :
of local exchange telecommunications :
services in the State of Illinois :

07-0490

APPLICATION FOR CERTIFICATE TO BECOME A
TELECOMMUNICATIONS CARRIER
(Use additional sheets as necessary.)

GENERAL

1. Applicant's Name(including d/b/a, if any)

FEIN # 72-1403495 *MDM*

Everycall Communications, Inc. d/b/a All American Home Phone, d/b/a Local USA

Address: Street 4315 Bluebonnet Blvd., Suite A

City Baton Rouge State/Zip Louisiana 70809

2. Authority Requested: (Mark all that apply) 13-403 Facilities Based Interexchange

☒ 13-404 Resale of Interexchange
and Local Exchange

☒ 13-405 Facilities Based Local

3. Request for waivers/variances: In applications for local exchange service authority under Sections 13-404 or 13-405, waivers of Part 710 and of Section 735.180 of Part 735 are generally requested. In applications for interexchange service authority under Sections 13-403 and 13-404, waivers of Part 710 and Part 735 are generally requested. Please indicate which waivers Applicant is requesting and explain why Applicant is requesting each waiver/variance.

☒ Part 710 Uniform System of Accounts for Telecommunications Carriers

☐ Part 735 Procedures Governing the Establishment of Credit, Billing, Deposits,
Termination of Service and Issuance of Telephone Directories for Local Exchange
Telecommunications Carriers in the State of Illinois

☒ Section 735.180 Directories
☐ Other

4. For all applicants requesting local exchange authority under Section 13-404 or Section 13-405, please complete the following:

- (a) the Standard Questions for Applicants Seeking Local Exchange Service Authority found in Appendix A of this document;
- (b) the 9-1-1 Questions for Applicants Seeking Local Exchange Service Authority found in Appendix B of this document;
- (c) the Financial Questions for Applicants Seeking Local Exchange Service Authority found in Appendix C of this document; and
- (d) if applicable, the Prepaid Service Questions for Applicants Seeking Local Exchange Service Authority found in Appendix D of this document.

5. In what area of the state does the Applicant propose to provide service?

Long distance and Local exchange facilities-based unbundled network elements will be provided in all Ameritech exchanges.

6. Please attach a sheet designating contact persons to work with Staff on the following:

Attachment #1

- a) issues related to processing this application
- b) consumer issues
- c) customer complaint resolution
- d) technical and service quality issues
- e) "tariff" and pricing issues
- f) 9-1-1 issues
- g) security/law enforcement

Please identify each contact person's (i) name, (ii) title, (iii) mailing address, (iv) telephone number, (v) facsimile number, and (vi) e-mail address.

7. Please check type of organization?

☐ Individual

☒ Corporation

☐ Partnership

Date corporation was formed November 20, 1997

In what state? Louisiana

☐ Other (Specify)

8. Submit a copy of articles of incorporation and a copy of certificate of authority to transact business in Illinois. **Attachments #2 and #3**

9. List jurisdictions in which Applicant is offering service(s).

Attachment #4

10. Has the Applicant, or any principal in Applicant, been denied a Certificate of Service or had its certification revoked or suspended in any jurisdiction in this or another name?

☐ YES (Please provide details) ☒ NO

11. Have there been any complaints or judgements levied against the Applicant in any other jurisdiction?

____ YES ☒ NO

If YES, describe fully. _____

12. Has Applicant provided service under any other name?

____ YES ☒ NO

If YES, please list. _____

13. Will the Applicant keep its books and records in Illinois? ____ YES ☒ NO

If NO, permission pursuant to 83 Ill. Adm Code Part 250 needs to be requested.

Permission is requested to maintain its books and records outside of Illinois pursuant to 83 Ill. Adm. Code Part 250. Books and records will be maintained in Georgia.

MANAGERIAL

14. Please attach evidence of the applicant's managerial and technical resources and ability to provide service. This may be in either narrative form, resumes of key personnel, or a combination of these forms. **Attachment #5**

15. List officers of Applicant.

Attachment #6

16. Does any officer of Applicant have an ownership or other interest in any other entity which has provided or is currently providing telecommunications services? ____ YES ☒ NO

If YES, list entity. _____

17. How will Applicant bill for its service(s)? (At a minimum, describe how often the Applicant will bill for service and details of the billing statement.)

The Company will bill customers directly on a monthly basis. All bills will set forth

call detail information, the Company's name, address and toll free number.

18. How does Applicant propose to handle service, billing, and repair complaints? (At a minimum, describe Applicant's internal process for complaint resolution, the complaint escalation process, the timeframe and process by which the customer is notified by Applicant that they may seek assistance from the Commission?)

The Applicant accepts inquiries and complaints via its toll free Customer Service telephone number 1-800-336-4588. Customer Service representatives will try to resolve any inquiries immediately, however, if they are unable to do so, the customer is advised that an investigation will be made by the Company, and the customer will be informed of the outcome of the investigation.

Should the customer be dissatisfied with the resolution, the customer is advised that assistance may be sought from the Illinois Commerce Commission.

19. Will personnel be available at Applicant's business office during regular working hours to respond to inquiries about service or billing? ☒ YES ☐ NO

20. What telephone number(s) would a customer use to contact your company?

800-336-4588 (Toll free)

21. Will Applicant abide by all Federal and State slamming and cramming laws pursuant to Section 13-902 of the Public Utilities Act and Section 258 of the 1996 Telecommunications Act?

☒ YES ☐ NO

22. Please describe applicant's procedures to prevent slamming and cramming of customers?

The Applicant requires written letters of agency prior to switching a customer's service.

23. If granted authority to operate as a local exchange carrier, will the applicant abide by the following 83 Illinois Administrative Code Parts: 705, 710, 720, 725, 730, 735, 755, 756, 757, 770, and 772?

☒ YES ☐ NO (If no, please provide an explanation.)

Except to the extent that waivers are granted.

24. Is Applicant aware that it must file tariffs prior to providing service in Illinois?

☒ YES ☐ NO

The Company intends to operate under the attached long distance and local exchange tariffs. Should changes be required at a later date, appropriate tariff revisions will be made at that time.

FINANCIAL

25. Please attach evidence of Applicant's financial fitness through the submission of its most current income statement and balance sheet, or other appropriate documentation of applicant's financial resources and ability to provide service. **Attachment #7**

TECHNICAL

26. Does Applicant utilize its own equipment and/or facilities? ☐ YES ☒ NO

If YES, please list the facilities Applicant intends to utilize. Also include evidence that Applicant possesses the necessary technical resources to deploy and maintain said facilities:

If NO, which facility provider(s)'s services does the Applicant intend to use?

Although requesting facilities-based authority for the provision of certain unbundled network elements, the Company will not deploy any equipment or facilities in Illinois. The Applicant will lease facilities from the underlying carrier or a third party vendor to the extent necessary to offer unbundled network elements from the ILEC.

27. Please describe the nature of service to be provided (e.g., operator services, internet, debit cards, long distance service, data services, local service, prepaid local service).

The Company is currently requesting facilities-based authority in order to provide certain unbundled network elements. The Company will provide prepaid and postpaid local exchange and long distance services.

28. Will technical personnel be available at all times to assist customers with service problems?

☒ YES ☐ NO (During normal business hours)

29. If Applicant intends to provide payphone service, will the equipment utilized comply with FCC requirements and Finding (9) of the Commission Order entered in Docket No. 84-0442 on June 11, 1986, including, but not limited to: (a) touch dialing; (b) access to 9-1-1 and "0" operator dialing without use of a coin; (c) rules governing use of payphones by disabled persons; (d) ability to complete local and long-distance calls; (e) unlimited duration for local calls; and (f) a message explaining the telephone's general operations, dialing instructions for emergency assistance, payphone owner's name, method of reporting service problems and method of receiving credit for faulty calls? ☐ YES ☒ NO

The Company will not provide payphone service.



John Brydels, Jr., CFO

VERIFICATION

This application shall be verified under oath.

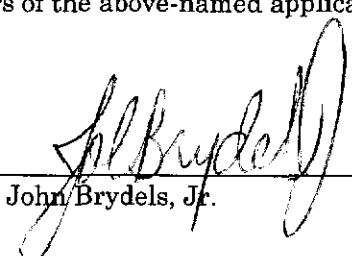
OATH

State of LOUISIANA)
County of JEFFERSON)ss

John Brydels, Jr. makes oath and says that he is CFO
(Insert here the name of affiant) (Insert the official title of the affiant)

of Everycall Communications, Inc.
(Insert here the exact legal title or name of the Applicant)

that he has examined the foregoing application and that to the best of his knowledge, information, and belief, all statements of fact contained in the said application are true, and the said application is a correct statement of the business and affairs of the above-named applicant in respect to each and every matter set forth therein.


John Brydels, Jr.

Subscribed and sworn to before me, a Notary Public ATTY AT LAW
(Title of person authorized to administer oaths)

in the State and County above named, this 18th day of Sept, 2007.


(Signature of person authorized to administer oath)

LEON L. NOWALSKY
Notary Public, State of Louisiana
My Commission is issued for life.
Notary Number: 4330